

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
						CLAIMS				
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT					
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	2									
TOTAL DEP.	16									
TOTAL CLAIMS	18									